W 435899

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

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		. —							<del>~~</del>				4
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EI	YTITY	OR	OTHER SMALL		
TOTAL CLAIMS			26					RATE	FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TO	TAL CHARGE	ABLE CLAIMS	<b>26</b> minus 20=		• 6			X\$ 9=		OR	X\$18=	108	
INI	DEPENDENT CI	LAIMS	ς minus 3 = * Φ					X43=		OR	X86=	100	
M	JLTIPLE DEPEN	NDENT CLAIM P	RESENT					. 1.45		1			
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=		OR	+290=	D) a	
								TOTAL		OR	TOTAL	8+8_	1
	Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 25	Minus	# X	10	=		X\$ 9=	•	OR	X\$18=		
	Independent	. 9	Minus	***	3	= (0.		X43=		OR	<b>200</b>	120	D
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. 1 45			+290=		
1,	11,19						l	+145=_ TOTAL		OR	TOTAL	-17/	DZ
,				•		•	. /	ADDIT. FEE		OR	ADDIT. FEE	100	
		(Column 1)	<del></del>	(Colun		(Column 3)				1			
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO	BER DUSLY	PRESENT EXTRA:		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X43=	·	OR	X86=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							4.45			. 000		
							Į	+145= TOTAL		OR	+290=	•	
										OR	ADDIT. FEE		
		(Column 1)		. (Colun		(Column 3)		-					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total ·	*	Minus	##		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=	ŀ	X43=			X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE										OR	· TOTAL ADDIT. FEE		
		ber Previously Pai					r fou	nd in the app	ropriate bóx	in col	umn 1.		